

Meeting - April 5, 2023 12-2pm (Mik Facilitating)

Attendees:

Jennifer Lambert (she/her - Neighborhood Defender Services)
Mik Kinkead (he/him - Legal Aid Society)
Saloni Sethi (they/she - Mayor's Office to End Gender Based Violence)
Natalie Fiorenzo (she/her - New York County Defenders Services)
Shear Avory (they/them - New Pride Agenda)
Deborah Lolai (taking minutes; she/her - Bronx Defenders)
Nicole Levy (she/her - Correctional Health Services)
Sahar Moazami (they/them - City Council)
Chelsea Chard (she/her - Department of Correction)
Michael Griffin (he/him - NYC Commission on Human Rights)
Liz Munsky (she/her - Department of Correction)
Rachel Golden (she/they/Rachel - Golden Psychology)
Heather Burgess (she/her - Board of Correction)
Dori Lewis (she/her - retired LAS)
Grace DeTrevarah (she/her - Osborne)
Andy Bowen (she/her - Independent)
Melanie Weniger (she/her - Commission on Gender Equity)
Ronald Porceli (they/them - UNITY Project)
Sarah Milner-Barry (she/her - Commission on Gender Equity)

Mik Facilitating

- Mik acknowledged the new members
- Mik gave a rundown on how the Task Force was developed and its purpose of making recommendations regarding TGNCNBI people in custody, observing their implementation, and evaluating their implementation.

Introductions

Follow-ups from Last Meeting:

Mik:

- Would like an update on information on access to razors, access to wigs, and consulting for internal and external policies.
- Will send the amended City Council bills to allow Task Force members to push for meeting with Councilmembers.
- Mik reconnected Liz with Andrea Williams for Re-Entry guide support
 - Liz received two responses.

Mik asked Chelsea:

- Did staff go through the law library etc. to look for SCU forms?
- Can we get more information on hair pieces?

Chelsea: deferred to Liz

- Liz: shared that SCU forms were previously available in the Law Library (LL), but LL can only have legal info and legal books. Can't have SCU forms in LL, but they are available

in social services. DOC can put forms on tablets, which most if not all people in custody (PIC) should have. Will be re-putting LGBTQ disclosure and services request form on tablet, this allows PIC to discreetly disclose LGBTQ+ identity, apply for housing, or ask for services.

- Mik: asked for more info regarding the disclosure form.
- Liz: All PIC will have access to the form, but not sure yet about the exact layout on the tablets. Liz will be meeting with them soon. There will be no set SOGIE categories. There will be check-marks for requesting services, including an option for services that aren't listed. These forms go straight to Liz and if the PIC is disclosing for the first time, it will prompt a face-to-face with Liz.

1. Wigs

Mik: what is the protocol for non-visitors regarding wigs?

Chelsea: will look into this. Are you referring to non-DOC staff?

Mik: non-DOC staff, plus anyone else DOC would provide guidance to or mandate clothing for entrance. Not visitors.

Chelsea: volunteers and contract providers. What is the purpose of this question?

Mik: we were told anything for gender expression could be potentially dangerous. Is it also dangerous if worn by people not in custody and visitors?

Chelsea: wigs not permitted for PIC, not sure why we're asking for info.

Shear: identifying how policies impact PIC and how they're different for non-DOC staff. Seems you're saying it doesn't present an imminent danger for anyone not in custody.

Chelsea: official response is we have different policies for individuals vs PIC. As explained in the last meeting, it is common policy across all jails and prisons to prohibit use of wigs by PIC because of safety and security concerns.

Shear: please point to numbers, citations, etc. for your official response.

Chelsea: can point to policies for PIC, any other outside research Heather can provide, but info is readily available. Policy doesn't specifically relate to trans people in custody.

Mik: we can FOIL, transparency in gov. is a good thing. FOIL will take more time, it would be easier to answer now. Not unreasonable to say there is significant medical literature to allow gender affirming items to reduce suicide, self harm. It is allowed in OCS and ACS care because it reduces suicide and self harm. Not unreasonable if you're allowing for other people, so should be allowed in these instances,

Chelsea: like I said, will share policies that relate to this TF. I understand what you're saying but the facilities you pointed out are not secure detention facilities.

Mik: Horizon is a secure detention facility.

Chelsea: there are different definitions that dictate policies. Crossroads is not considered a secure detention facility. Horizon presents more as a jail, but can't remember classification.

*****Shear noted**: if we (TF) want info, we will need to do it ourselves or put in a FOIL request. DOC will not provide.

Natalie: the scenario last month was wigs could be used to simulate a person sleeping in a bed. What's the difference between a CO giving their wig to someone or someone taking a wig off of someone's head? Say a CO enters with a wig. They do not have to remove their wig, certain it's common practice. DOC's reasoning is it can be used for escape attempt, but if CO has a wig that PIC can get, what's the difference?

Shear: who's to say someone in custody won't or can't steal wig? The point is if a wig is accessible, it doesn't seem like DOC has a firm response at how that's a danger or possible for escape.

Deb: RMSC is only facility that enforces wig ban. This seems like it is intended to out trans women.

Ronald: what is the process for exploring this at DOC? Potential area to work on and try to fix. Is there an avenue to pursue this further? Long-term thinking as policy is revised or made.

Chelsea: raise it to security chief and staff, but will tell you unlikely that there is a path forward on this.

Mik: that is really disappointing. What is the point of TF if we point out benefits, concerns, etc and response is it's not going to go anywhere?

Chelsea: I have raised this issue internally.

Mik: you never told us this.

Chelsea: that was not my intention, but I'm letting you know now that this is something I raised and it came through Council questions as well, it has been raised before and based on conversation I know what is likely to move forward and what isn't.

Shear: point from Mik is that even when issue is raised, response we receive month after month is we (DOC) raised it internally and it won't go anywhere. Not possible. Even Ronald suggested working in good faith. Trying to think about tangible solutions but we're being told that no matter what, there's no movement on DOC's side. Be cognizant of experts and avoid turning into debate. DOC should listen and take recommendations since there's such a clear lack of intention to work in good faith. It's really disappointing that here we are again making recommendations that can't go anywhere. It speaks to the level of harm that this TF has experienced over the last several years, encourages us to bring this to Council because we know DOC doesn't move unless forced by law or lawsuit. Hudson and Caban are working on a draft plan that addresses issues in carceral system, this is an area where we can suggest they take a deeper look and craft legislation to move the ball forward if we can't do that in this space.

Mik: we are talking about wigs, not housing.

Rachel: previously if we had looked at any DOC setting we would find they were not amenable to gender affirming care. Wigs are important and I understand the flight risk as a conceptualization but also remind that NY has been the leader with this population. DOC does a lot of things for the good of people that may be unique to NY - binders, hormones, etc. And CHS wants to affirm people and be leaders, maybe this is a good opportunity. If this alleviates mental health concerns, maybe other security measures can alleviate flight risk. Rikers staff want to be leaders, this is an opportunity for NYC to set the standard. How risky is it? I don't understand the calculations but DOC has revised policies for trans folks. They would say in the past unlikely to change. DOC needs to relook at true risk. May not be as risky as believed, would help alleviate mental health and life risk. Maintain a position of hopefulness that change can happen because it has before and folks at Rikers are trying to make gender-affirming changes. Could be reconsidered.

2. Transparency and Collaboration

Deb: one thing that stands out is Mik said we weren't given the opportunity to advocate for that and while Chelsea may be understanding and have expertise on corrections, there are members of TF with more expertise in the area of needs of trans people. Would it make a difference if someone with that level of expertise were given an opportunity to explain to decision makers why this would be beneficial for everyone? PIC and staff. Historically there has not been a lot of space for us to speak directly to DOC, but think that talking about issues like this with an opportunity to advocate could have more of an impact.

Mik: if we know something is raised internally, we can cite articles, make presentations, present etc. to policy makers. This is a request for Liz and Chelsea, if you plan to raise anything from TF internally, let us know so we can present or develop a presentation with supporting documents. If we hadn't brought it up, we would never know this was brought up internally. Shows TF is having an impact, this is a chance for DOC to shine.

Ronald: is it too late to have documents created for this issue to be helpful for Chelsea to add background info? Additional info about this issue can then be shared and Chelsea can relay info.

Deb: no one here will say no to putting together info, but are we wasting our time? Will info be used in policy changes?

Chelsea: any info put together will create a report with written recommendations. Why not include it in report? Not going to defend self, no way to convince you we are working in good faith. Liz and I are doing work, we won't always agree with decisions being made but we are here listening to you. If you want to get info out and documented, I encourage you to do that for the report. Assure you that work is being done and we are advocating to the best of our ability. These are complicated topics, there are different levels of expertise, in some spaces we're not going to agree. Put in recommendations to continue being considered.

Liz: to give context, when it comes to things like permissible binders, that took two years and numerous presentations to get chest binders approved. This convo is getting personal, we are trying our best. No more convincing we are working in good faith. Work is being done, can't be done in one month's time.

Saloni: the issue is are we collaborating? We know you're doing it, but you're not telling us.

Liz: you all asked it to be done and we did it. Maybe it wasn't to the extent you wanted. We can collaborate in future now that we've had this convo. You have to give us an opportunity to speak, if everyone is shaking their head then why are we on these phone calls?

Shear: very good questions. We have been run around with DOC giving us the same canned answers. The Commissioner didn't go to City Council prepared. Lackluster support from BOC and DOC, great question why is DOC here if there is a pattern of not working with TF? Chairs of committees acknowledged that DOC is not working with TF in good faith. Actions speak louder than words. Recommendations have gone nowhere, can be brought up internally but told in this space there's no way forward. Is it worthwhile? The answer is, why is DOC here in the first place? We've gotten nowhere. Tired of being talked down to since the very beginning, I am the only person with directly impacted experience, close to age as Layleen Polanco. There's been harm, trauma in this process. To say that it's getting personal to DOC, consider how this could possibly not be personal. How could it not be? Yes this is personal, we are experts commissioned by the City Council. That needs to be respected in this space. Until TF dissolves, we will be commissioned by city of NY to do this work. You don't have to like it, we don't have to like your response, we are commissioned to do this work.

Ronald: I know this has been challenging, acknowledge work everyone is doing. We all want to partner together and drive work forward so if we could try to make that happen. There is good will, we all want work to move forward. This is challenging, going against the grain of the nation. Opportunity here notwithstanding all the pain at large and on this TF.

Saloni: also ok to rethink things. In theory, the whole idea is we know change will be difficult, but you have support to implement changes. We can support DOC in acknowledging that change is difficult. If the answer is submit a FOIL or talk to Council member, what's the point of this space? We are supposed to be working together.

Grace: why are you (DOC) here besides representing DOC? Because listening to Chelsea I get the impression that you are a notetaker for who you work for, but you come across as if you want to work with us. Since 2019 no one in DOC has come across as working with us. Have positions been filled since the City Hall hearing? Has anything been addressed at DOC from the hearing? Where is DOC since the hearing, where does DOC sit on any of our report? Can we get that?

Chelsea: the job posting is up, we have received applications. Currently in hiring process, it takes a long time for the city. Takes months to hire within city, will not be filled next week. Set expectations.

Liz: we have interviews at the end of this week. Have 70 applications, 22 – 25 people being interviewed for 3 positions. Next week phone interviews. Given tight deadline to select by May. We can have candidates picked but then it's up to OMB. Acknowledge that all city workers nodding their heads that it takes months. Unfortunate reality of working for the city.

Mik: The last time we asked was in December, but there was a hiring freeze? You're hiring and you didn't tell us. If you don't tell us things, you're not communicating. I don't know how else to express that if you don't tell us, we don't know it's happening. If not communicated here, idk what else to say.

3. Directives and Law Library

Mik: Question for Liz, is directive in LL? It has SCU form attached.

Liz: directives and policies are not allowed in LL. Only legal books and law related info regarding criminal cases.

Mik: the inmate handbook says rules that affect rights in jails can be found in LL. Is that true?

Liz: we can't provide directives, they are not public to the community, there are only 4 directives authorized for review in LL. 4498R-A is not one, I will work on advocating for that. (Mik and Grace volunteer to assist with this.) We are not a general library, so we don't organize or behave like a normal library. We can provide legal pieces regarding the community, but can't have community resources

Note that Heather temporarily left the meeting. As such there was a brief pause in note-taking. Heather returned shortly thereafter and stated her obligation had been moved to a later time. She resumed note-taking.

Liz: will respond back to get more clarity, but your question was about directives. Did not specify SCU form. Will send email today and send with update.

Grace: I worked in LL, I asked about this 4 months ago. Those SCU forms are given in social services. Placed in LL as a courtesy, but on paper they will say those things are not allowed because it's not legal info or legal information. Very conflicting and the answer varies. I don't think there's something to look for since this is done out of courtesy, not policy. All facilities will interchangeably say info about property, divorcing, general documents you can copy from a book in LL. But the documents for things outside of proceedings to court, the answer is no. It is necessary you get on that, Mik.

Chelsea: Do we want to make them available to most amount of people, is that the larger question?

Mik: It is in the directive.

Note: The Directive referenced here is an older version. The newest version of this

Directive does not state that the SCU form will be available in the Law Library. The Task Force does not have a copy of the newest Directive.

Chelsea: I understand but I'm asking in case the directive is not directly addressing that. In the meantime, I know we just got the SCU forms on tablets. Everyone should have those available or we're getting it running super soon. Confidentiality of tablets, but if the other part of what we're trying to accomplish is having folks have support filling them out if they need to. I'm not saying no to LL, trying to have the most impact. It's not that we can't have them, but I want to make sure it's accomplishing what we want. People in LL may not understand, that's why it's in social services.

Grace: the directive says supposed to be there. LL is not a privilege. Someone put the form in social services when technically it's supposed to be in LL.

Chelsea: trying to figure out how we got here.

Grace: LL is self-service, assistance is a courtesy. They provide info, designed to be self-serving. Info in social services when it's a privilege, it shouldn't be there in the first place.

Liz: I understand, it should be where people can access. I agree. Need clarification that LL can be a place with forms, the goal is to get people to have assistance in filling out the form. They will not get assistance in LL.

Grace: we're talking about access to form

Chelsea: ppl should have access to form, that's why it's on tablet. Shouldn't even need to go to LL, can submit on their tablet. Now it is constantly accessible. The steps have been removed.

Mik: It does matter that it's in the directive. If DOC isn't following the directive, that's not most important issue, but it does matter that DOC follows their own directives. I use directives to inform clients, I have been telling them it's in LL. We know it's not in holding pens or courthouse. DOC has no control over that, but when it's not in places it should be according to the directive, that's concerning. I was at SCU yesterday, saw it on tablets, doesn't correspond to technical literacy or knowledge around that. How would people know? Nothing's perfect, but important they have different options. Someone could have a broken tablet, which happens to gay clients. Cannot be reliant on one access point.

Liz: I agree they should be in LL and will get clarity on putting in LL. Just to clarify, LL would not have been the only access form. They can request the form at any point in time. Might out them, we are trying to rebuild discreet means of disclosure. Not to say we won't place in LL. If we want to make sure PIC have access to form in the most consistent way possible, somewhere they access all the time, where outside of LL, intake, social services, A stations etc. what would be your suggestions as to where forms should be placed so more PIC have access to them?

Grace: Places it's intended to be, it should be there. Corrections is not being innovative. Will go to LL and social services. Other things, no statement on those. Please clean up the handbook, should have two consistent places because that's what they have consistent access to. Focus on intent, LL and social services. But emphasis on LL.

Deb: Medical? Mental Health?

Liz: will make sure to get clarification and populate the forms in there. We have provided forms to CHS and get forms when they get disclosures, forms are already there.

New Agenda Items

Mik: Andy and Deb may have a new member, they want to discuss with the group.

Deb: Andy emailed about Zara Malcone who works for the Department of Sanitation (DOS) and is the head of DOS's LGBTQ Employee Resource group. Zara responded to share about their work. Sounds like Zara has been doing independent advocacy around trans folks at Rikers and reaching out to officials. Super passionate about issue. Never had a formal process for membership. TF recently added individuals to fill in gaps where people aren't represented for gathering data. Are we looking to add folks to TF who are interested and are passionate, or do we want to create another process for that? Just relaying the message.

Grace: do we want to put someone else through this? Because we have had headaches for 4 years. Have you prepared them for the stuff they're going to hear? We got enough of us traumatized. If they are willing –

Deb: – have not had that convo.

Grace: have it. This isn't a get-together. People don't know we have to ask the dumbest shit, the last thing we need is people not understanding. We need real assistance, a person with solutions. Ain't no fire under DOC.

Deb: she's Andy's friend, Andy could speak more about strengths. Didn't want to have convo with Zara until I reached out to TF.

Grace: had someone told other people who came on after we were on, I don't think they'd want to be here. This isn't about feeling, it's about trying to change things. People need to know this is not fun. This isn't cut and paste for us. Give them my number.

Deb: are there any other thoughts?

Melanie: would she be here as city employee or personal capacity?

Deb: I don't know. I don't care where people are joining from as long as they're helping people move forward.

Grace: is that because of a union reason? Is there a stipulation for city employees?

Melanie: there are city employees who work on these issues. Zara has done a lot of work in similar environments. I wonder if she could share her experience in trying to change the culture that could be beneficial for this group? If she wants to join, I wonder if that's a way she could contribute to this work in a professional capacity.

Mik: we don't have policies around this. In the past the group has decided if we want to expand. Need people with the ability to be present and sign up for things. Grace made good points. No shade to Andy, but she may not have a complete sense about them. No idea what Zara's knowledge of corrections is, but there would be a lot of catch up for her.

Sahar: professional vs non-professional is in the law, there is a distinction made in composition. City would need appointment by the agency. Just wanted to make that distinction.

Heather: there are other membership requirements that we should focus on instead of bringing in another person from a city agency. We have very few people of color, directly impacted folks, still don't have a person in custody in the group or someone representing intersex populations.

Sahar: city agency representatives on the TF are already frustrated about what we can do. Unless there's a clear line of how we can contribute, those are the people we should be looking for. We need people who can help shift things.

Deb: I'm hearing that right now isn't the time, does that sound right?

Sahar: they can come share the work they've done if they want, and I hope Andy got a good sense of the TF from today's meeting.

Ronald: I am not on the drafting committee, but 2 meetings ago we brought up reentry and fleshing out programs that can be included in the next report. Not an expert in reentry, is there anyone here that would like to partner or direct me to someone? Forgive me if this is already being done in smaller committees, would be great if we could develop a reentry program to contract with DOC and provide support.

Saloni: talk to MOCJ.

Ronald: I know MOCJ contracts with re-entry providers, but not sure if they're LGBTQ+ providers.

Saloni: we could talk to them about it. Talk with Kandra because Exodus works with MOCJ.

Ronald: anyone else? This could be included in the report.

Mik: speak to Kandra and Grace.

Michael: CCHR may be able to have someone from our Community Relations Bureau join, Ronald. I will discuss internally and get back to you.

Updates from Drafting Committee

Deb: put a plug in for anyone who hasn't joined the drafting committee but would be interested in writing next report. Add your name to the list or reach out directly and you will be added to the invite. Meetings held once a month, first or second Monday but will check. Decided meeting timelines at last drafting committee meeting, realistic goal is winter, Dec 2023? Or Jan 2024. Sections include –

Mik: - lack of prioritization for TGNCNBI PIC, lack of follow-up from previous recommendations, borough based jails and recommendations, ending solitary or punitive isolation, Rachel's work with CHS, encouraging non-city contracted meds instead to consider the fact that providing

services to PIC is important. Hospitals don't want to serve this community. We have a rough outline. Also we want this version to be more accessible to community. At the City Council hearing, Rivera and Caban were prepared, but Powers didn't attend. Many left halfway through. Aiming our report at electives and government officials might not be as helpful, we should aim at community members and organizers, or organizations considering making their own task force or committees. Distributing the report to organizations may be useful too.

City Council

Mik: planned outreach to different city council members and public advocate bills to encourage edits. LGBTQIA caucus is releasing pathway and we want to make sure we meet with them and make sure it represents what we feel is important and reflects all of this. Will reach out to Rivera and Caban about who should be the point person since Rosenthal isn't there and we need support. All edits to bills were in a google doc, if anyone wants to see them I can email the new word documents.

Sahar: were all edits sent to city council members, or committee legislative councils as well?

Mik: edits went to Jeremy and Brenda (Power's bill). Others weren't sent. Regarding the OCA bill, Deb and Shear are working on edits because there were significant concerns over gender markers, non-binary people have nowhere to go and the Commissioner suggested at the hearing that all trans people should have X on their securing order. We do not encourage this. Some trans people are nb, but not all.

Sahar: when edits have been finalized, send them to the committee council. This is integral to editing efforts. Send to Jeremy and Brenda.

Next Steps

- Mik is going to put a formal request in writing for the following: directives regarding access to razors at RMSC and in various units within RMSC (4008R-A, Distribution and Control of Razors); directives regarding wigs at RMSC vs other facilities and names of who they consult with on policies, both internal and external.
- Mik will send around amended bills to update all on bill editing. TF members may then begin pushing for meetings.
- Link to [2023 TGNCNBI Advocacy Day](#). Will be held April 25, 2023.

Next Meeting & Facilitator:

- May 3rd at 12pm. Shear facilitating.